	Approved for	r use through 1	0/31/2002 ON	/B 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional application under 37 CFR 1.53(b)

Name (Print/Type) Daniel P. Burke

Signature

Attorney Docket No.: First Named Inventor:

Title:

Express Mail Label No .:

1650-6

Dong-Hwan Kim

LONGITUDINAL MAGNETIC FIELD COMPACTING METHOD AND DEVICE FOR MANUFACTURING RARE

EARTH MAGNETS EV 171218264 US

APPLICATION ELEMENTS See MPEP chapter 6000 concerning design patent application contents			ADDRESS TO: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
1.	Ø	Fee Trans	mittal Form (e.g. PTO/SB/17) riginal, and a duplicate for fee processing)		7.		CD-ROM or CD-F Computer Program	R in duplicate, la m (Appendix)	
2.	Ø		ims small entity status	į	8.		Nucleotide and/or Submission (if ap	Amino Acid Se	
3.	×	_					a. D Computer I	Readable Form Sequence Listing OM or CD-R (2 o	(CRF) 2007 g on 27 copies or 27
		- Backgrou	and of the Invention		ACCOMPANYING APPLICATION PARTS				
	 Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description Claim(s) 				9. 10.		r iooigiiiii oiii oipo	,	& document(s)) Power of Attorney
	[∑]		f the Disclosure	,	11.				•
4. 5.	a. Newly executed (original or copy)			1	12.		Information Disclo Statement (IDS) F	`	Copies of IDS
				13.		•			
	b.	 D Copy from a prior application (37 CFR 1.63(d)) a. □ DELETION OF INVENTOR(S) 		ა(a))	14.	\boxtimes	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)		
}	Signed statement attached deleting inventor(s) named in the prior appl., see			15.	X	Certified Copy of lift foreign priority is cla			
6.		37 CFR 1.63(d)(2) and 1.33(b)			16.				
					17.	Ø	Other:PTO-203		
18.	18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:								
		ntinuation		ontinuat	tion-ir	n-pa	art (CIP) of prio	• •)
Prio	or ap	plication inf	formation: Examiner:	closure o	of the i	orior	Group Art Uni application, from which		tion is supplied
unde	er Box	x 5b, is consid	ered a part of the disclosure of the accompration can only be relied upon when a porti	panying o	continu	ation	n or divisional applicatio	n and is hereby inc	corporated by
	19. CORRESPONDENCE ADDRESS								
	☐ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or ☑ Correspondence address below								
Nai	Name Galgano & Burke								
Address 300 Rabro Drive, Suite 35									
City	,		Hauppauge	State			New York	Zip Code	11788
			phone		631-582-6161	Fax	631-582-6191		

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F:\G&B\1650\6\text{lransmittal.wpd}

Date

Registration No. (Attorney/Agent)

30,735

PTO/SB/17 (01-03)
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F	EE	TR	ANS	MIT	ΓAL
	F	OR	FY	2003	•

CHve 01/01/200. Patent fees are subject to annual revision plicant claims small entity status.

See 37 CFR1.27

TOTAL AMOUNT OF PAYMENT (\$)

Application Number:
Filing Date:
First Named Inventor
Examiner Name:
Group Art Unit:
Attomey Docket No.:

Complete If Known	_
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Dong-Hwan Kim	-
1650-6	•

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)						
□Check ⊠Credit □Money □Other □None Card Order	3.	ADDI	TION	AL FE	ES		
☑ Deposit Account: Deposit Account Number: 07-0130		Entity	Small	Entity			
Deposit Account Name: Galgano & Burke The Commissioner is authorized to: (check all that apply)	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		Fee Paid
☐ Charge fee(s) indicated below ☐ Credit any overpayments	1051	130	2051	65	Surcharge - late fi	ling	
Charge any additional fee(s) during the pendency of this application except for issue fee	1052	50	2052	25	or cover sheet	rovisional filing fee	
☐ Charge fee(s) indicated below, except for filing fee to the above-identified deposit account.	1053 1805	130 2520	1053 1812	130 2520	Non-English speci For filing a reques		
FEE CALCULATION 1. BASIC FILING FEE	1804	920*	1804	920*			
Large Entity Small Entity	1805	1840*	1805	1840*	to Examiner action Requesting public Examiner action		
Fee Fee Fee Code (\$) Code (\$) Fee Description Fee Paid	1251 1252	110 410	2251 2252	55 205	Extension for reply	y within first month	
1001 750 2001 375 Utility filing fee \$ 375/00 1002 330 2002 165 Design filing fee 1003 520 2003 260 Plant filing fee	1253 1254	930 1450	2253 2254	465 725	Extension for reply	y within third month y within fourth month	
1004 750 2004 375 Reissue filing fee	1255 1401	1970 320	2255 2401	985 160	Notice of Appeal	y within fifth month	
SUBTOTAL (1) (\$) <u>375.00</u>	1402	320 280	2402 2403	160 140	Filing a brief in sur Request for oral h	earing	
2. EXTRA CLAIMS FEES FOR UTILITY & REISSUE	1451	1510 110	2452	1510 55	Petition to institute proceeding Petition to revive -		
Extra Fee from Fee Claims below Paid	1453	1300 1300	2453 2501	650 650	Petition to revive - Utility issue fee (o.	unintentional	
Total Claims 6 - 20** = x = =		470 630	2502 2503	235 315	Design issue fee Plant issue fee		
Claims 2 - 3** =x =		130 50	1460 1807	130 50	Petitions to the Co Processing fee un	ommissioner der 37 CFR 1.17(q)	
Multiple Dependent =	1806 8021	180 40	1806 8021	180 40	Recording each pa	ormation Disclosure Str atent assignment per	
Large Entity Small Entity Fee Fee Fee Fee Code (\$) Code (\$) Fee Description	1809	750	2809	375		mber of properties) n after final rejection	<u>\$ 40/00</u>
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in	1810	750	2810	375	For each additional examined 37 CFR	al invention to be	
excess of 3 1203 280 2203 140 Multiple dependent claim, if not paid	1801 1802	750 900	2801 1802	375 900	Request for Contin	nued Examination (RCE lited examination)
1204 84 2204 42 **Reissue independent claims over original patent 1205 18 2205 9 **Reissue claims in excess of	Other	fee (spe	cify)		of a design applica	ation	
of 20 and over original patent							
SUBTOTAL (2) (\$) \$375.00 **or number previously paid, if greater, For Reissues, see above							
	SUBTOTAL (3) (\$) <u>\$ 40.00</u> *Reduced by Basic Filing Fee Paid						
SUBMITTED BY						COMPLETE (if applie	cable)
Name (Print/Type) Daniel P. Burke	Registration No. 30,735 Tel phon: 631-582-61				82-6161		
Signature Del Me						Date: 7/16/03	